Case 2:06-cv-00228-W	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
0430 2.00 0V 00220 VV	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature Agent Addressee
	 Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	B. Received by (Printed Name) C. Date of Delivery C. NEI - O. K. G. 4/17/0.6
	Article Addressed to: / / / / / / / / / / / / /	D. Is delivery address different from item 1? Yes If YES, enter delivery politices below: No
	Robert Songandons	3. Service Type
	Ath. Box 30 2405 46 3613	Certified Mail
	2. Article Number (Transfer from service label) 7	05 1820 0002 3467 3170
	PS Form 3811, February 2004 Domestic R	eturn Receipt M-1540
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY A. Signature
	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. 	X Agent Addressee B. Received by (Printed Name) C. Date of Delivery
	Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to:	Society and address different from item 1? Yes
	May mar to	APR 17 2025
1. (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	18. 850X 3024	3. Service Type Certified Mail Registered Insured Mail C.O.D.
	2. Article Number	4. Restricted Delivery? (Extra Fee)
		Return Receipt 102595-02-M-1540
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. 	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Pelivery
· · · · · · · · · · · · · · · · · · ·	 Attach this card to the back of the mailpiece, or on the front if space permits. 	CORNE//LOIVG 4/17/06 D. Is delivery address different from item 1? Yes
	1. Article Addressed to: Believed Weat	if YES, enter delivery address below.
	Menry fluidos	33. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise
	19:01 Sex Sex 30 30 30 30 30 30 30 30 30 30 30 30 30	□ Insured Mail □ C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes
	2. Article Mumber 7004 (Transfer from service label)	1160 0003 5811 1864 95-02-M-1540

PS Form 3811, February 2004

Domestic Return Receipt